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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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MAIL

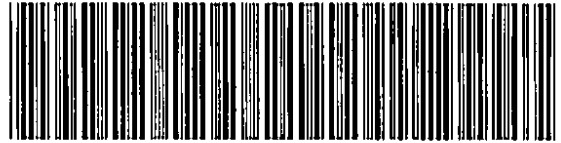
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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2020 APR 21 PM 1:54

SECRETARY OF STATE
TALLAHASSEE, FL

April 17, 2020

Department of State
Division of Corporations
Corporate Filings
P.O. Box 6327
Tallahassee, FL 32314

Re: Phoenix Primary Care, LLC

Dear Sir or Madam,

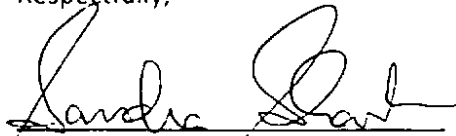
Enclosed for filing are the Articles of Organization for Phoenix Primary Care, LLC, a Florida limited liability company, together with a check for \$160.00, made payable to the Department of State to cover the following fees:

\$100.00	Filing Fee
\$25.00	Registered Agent Fee
\$30.00	Certified Copy
\$5.00	Certificate of Status

Please return a certified copy of the filed articles and a certificate of status to me at P.O. Box 354925, Palm Coast, FL 32135. For purposes of all email correspondence, please use administrator@almhhi.org.

Thank you for your assistance in this filing. If you have any questions, please call me at (386) 597-2861.

Respectfully,



Sandra Shank - Registered Agent

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SECRETARY OF STATE
TALLAHASSEE, FL

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**ARTICLES OF ORGANIZATION
of
PHOENIX PRIMARY CARE, LLC,
A Florida Limited Liability Company**

In compliance with the laws of the State of Florida, the undersigned does hereby form a limited liability company.

ARTICLE I - NAME AND PRINCIPAL OFFICE

The name of the company is Phoenix Primary Care, LLC. The principal office of the company shall be located at 2729 E Moody Blvd, Suite 104, Bunnell, FL 32110. The mailing address for the company is P.O. Box 354925, Palm Coast, FL 32135.

ARTICLE II - TERM OF EXISTENCE

The period of duration is perpetual. The company is organized pursuant to the Florida Revised Limited Liability Company Act. The date on which company existence shall begin is the date on which these Articles of Organization are filed with the Secretary of State of the State of Florida.

ARTICLE III - REGISTERED AGENT

The name and address of the initial registered agent and office of the company is: Sandra Shank, 44 Woodborn Lane, Palm Coast, FL 32164.

ARTICLE IV – OPERATING AGREEMENT

The Operating Agreement of the Company may be altered, amended, modified, or repealed in the manner set forth in the Operating Agreement.

ARTICLE V – AMENDMENTS

The Company reserves the right to amend or repeal any of the provisions contained in these Articles of Organization or any amendments hereto.

ARTICLE VI – MANAGEMENT

The Company will be member managed. The name and address of the person(s) authorized to manage this LLC is:

Title: AMBR
Abundant Life Ministries – Hope House, Inc.
P.O. Box 354925, Palm Coast, FL 32135

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TALLAHASSEE, FL